

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		25	05-31-00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	24		6-10-00

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral) ... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
Final	18-2
Original	17-1
1	0-1
2	0-0
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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